EXHIBIT D – Examples of Overcrowded Enclosures

Calculation for USDA Animal Care § 3.6 (c)(1)(i) Minimum Floor Space Requirement for a Primary Enclosure:

- sum of length of all dogs in enclosure in inches / number of dogs in enclosure = average length of dog in inches
- (average length of dog in inches + 6) x (average length of dog in inches + 6) = minimum floor space required (per dog) in square inches
- required floor space (per dog) in square inches * number of dogs in enclosure = total minimum floor space required in enclosure

Calculation for the Actual Space Available in Enclosure:

• ((Width (inside) in inches) x (Length (inside) in inches)) + ((Width (outside) in inches) x (Length (outside) in inches)) = actual floor space available in square inches

Calculation for the Maximum Number of Dogs (at average length) the Enclosure Provides Space for under USDA Animal Care § 3.6 (c)(1)(i) Requirement:

• (actual floor space available in square inches / minimum floor space required (per dog) in square inches), then rounded down to nearest whole number = maximum number of dogs (at average length) the enclosure provides space for

1. Enclosure ID: 9A102; Location: G2 Building 9 Wing 2; 10 dogs

- a. Enclosure Floor Dimensions:
 - i. Width (inside): 47.5 inches
 - ii. Length (inside): 49 inches
 - iii. Width (outside): 47 inches
 - iv. Length (outside): 73 inches
- b. Length of Dogs in Enclosure:

Animal ID	Length of Dog in Inches
9A102-01	22
9A102-02	23
9A102-03	22
9A102-04	18
9A102-05	20
9A102-06	20
9A102-07	22
9A102-08	22
9A102-09	21
9A102-10	21

c. Calculations

i. Average Length of Dog in Inches:

$$(22 + 23 + 22 + 18 + 20 + 20 + 22 + 22 + 21 + 21) / 10 = 21.1$$
 inches

ii. Minimum Floor Space Required (per dog) in Square Inches:

$(21.1 + 6) \times (21.1 + 6) = 734.1$ square inches required per dog

iii. Total Minimum Floor Space Required for Enclosure in Square Inches:

$734.1 \times 10 = 7341$ square inches required

iv. Actual Floor Space Available in Square Inches:

$$(47.5 \times 49) + (47 \times 73) = 5758.5$$
 square inches available

v. Maximum Number of Dogs (at average length) the Enclosure Provides Space for:

5758.5 / 734.1 = 7.844, rounded down to nearest whole number = 7 dogs

- 2. Enclosure ID: 9A105; Location: G2 Building 9 Wing 2; 10 dogs
 - a. Enclosure Floor Dimensions:
 - i. Width (inside): 47 inches
 - ii. Length (inside): 49 inches
 - iii. Width (outside): 47 inches
 - iv. Length (outside): 73 inches
 - b. Length of Dogs in Enclosure:

Animal ID	Length of Dog in Inches
9A105-01	20
9A105-02	21
9A105-03	21
9A105-04	20.5
9A105-05	22
9A105-06	23
9A105-07	20.5
9A105-08	20
9A105-09	19.5
9A105-10	22

- c. Calculations
 - i. Average Length of Dog in Inches:

$$(20 + 21 + 21 + 20.5 + 22 + 23 + 20.5 + 20 + 19.5 + 22) / 10 = 20.95$$
 inches

ii. Minimum Floor Space Required (per dog) in Square Inches:

$$(20.95 + 6) \times (20.95 + 6) = 726.3025$$
 square inches required per dog

iii. Total Minimum Floor Space Required for Enclosure in Square Inches:

$726.3025 \times 10 = 7263.025$ square inches required

iv. Actual Floor Space Available in Square Inches:

$$(47 \times 49) + (47 \times 73) = 5734$$
 square inches available

v. Maximum Number of Dogs (at average length) the Enclosure Provides Space for:

5734 / 726.3025 = 7.844, rounded down to nearest whole number = 7 dogs

- 3. Enclosure ID: 9A124; Location: G2 Building 9 Wing 2; 9 dogs
 - a. Enclosure Floor Dimensions:
 - i. Width (inside): 47 inches
 - ii. Length (inside): 49 inches
 - iii. Width (outside): 47 inches
 - iv. Length (outside): 73 inches
 - b. Length of Dogs in Enclosure:

Animal ID	Length of Dog in Inches
9A124-01	24
9A124-02	21
9A124-03	24
9A124-04	22
9A124-05	25
9A124-06	23
9A124-07	24
9A124-08	25
9A124-09	24

- c. Calculations
 - i. Average Length of Dog in Inches:

$$(24 + 21 + 24 + 22 + 25 + 23 + 24 + 25 + 24) / 9 = 23.56$$
 inches

ii. Minimum Floor Space Required (per dog) in Square Inches:

$$(23.56 + 6) \times (23.56 + 6) = 873.5309$$
 square inches required per dog

iii. Total Minimum Floor Space Required for Enclosure in Square Inches:

$873.5309 \times 9 = 7861.778$ square inches required

iv. Actual Floor Space Available in Square Inches:

$$(47 \times 49) + (47 \times 73) = 5734$$
 square inches available

v. Maximum Number of Dogs (at average length) the Enclosure Provides Space for:

5734 / 873.5309 = 6.5642, rounded down to nearest whole number = 6 dogs

- 4. Enclosure ID: 10A36; Location: G2 Building 10 Wing 1; 9 dogs
 - a. Enclosure Floor Dimensions:
 - i. Width (inside): 47.5 inches
 - ii. Length (inside): 49.5 inches
 - iii. Width (outside): 47 inches
 - iv. Length (outside): 73 inches
 - b. Length of Dogs in Enclosure:

Animal ID	Length of Dog in Inches
10A36-01	22
10A36-02	24
10A36-03	21
10A36-04	26
10A36-05	21
10A36-06	24
10A36-07	24
10A36-08	23
10A36-09	26

- c. Calculations
 - i. Average Length of Dog in Inches:

$$(22 + 24 + 21 + 26 + 21 + 24 + 24 + 24 + 23 + 26) / 9 = 23.44$$
 inches

ii. Minimum Floor Space Required (per dog) in Square Inches:

$$(23.44 + 6) \times (23.44 + 6) = 866.9753$$
 square inches required per dog

iii. Total Minimum Floor Space Required for Enclosure in Square Inches:

$866.9753 \times 9 = 7802.778$ square inches required

iv. Actual Floor Space Available in Square Inches:

$$(47.5 \times 49.5) + (47 \times 73) = 5782.25$$
 square inches available

v. Maximum Number of Dogs (at average length) the Enclosure Provides Space for:

5782.25 / 866.9753 = 6.6695, rounded down to nearest whole number = **6 dogs**

ATTACHMENT 1 – 9A102 Enclosure Evaluation Form and In-Field Exam Forms

ENCLOSURE EVALUATION	ENCLOSURE ID:_	9 A 10 Q
	CASE #: HY-	
	LOCATION: C	umberland, VA
MEASUREMENTS: 4 Size: Length 49 Width 47 12 Height 63	Tanananak main b	848
	remperature in b	uliding:
Number of animals in enclosure:	2 00.00	4 94107-05
Animal ID's: 9A102-01 9A102-02 9A102-0 9K102-06 9K102-07 9A102-08	90102-00	94102 -10
	JATOZEOS	3K102-10
GENERAL: Type of construction: welded		
Is enclosure dry? ≰Yes ☐ No		
Is enclosure clean and sanitary? ☐ Yes ☐ No		
Adequate ventilation? ★ Yes □ No		
Well lit? dyes □ No		
Adequate protection from the weather provided? $\cancel{\mathbf{x}}$ Yes \square No		
Are there any sharp points or edges? ☐ Yes ☑ No		
Is the enclosure secure? ★Yes ☐ No		
Drainage/disposal system operating properly? Yes No		
FLOORING:	7	
Any spaces or gaps big enough for an animal's feet or toes to pa	ss through or get	stuck? ≝Yes 🗆 No
Flooring made of material that can be sanitized? Ka Yes ☐ No		
Is the flooring secured down? Yes ☐ No Is the floor saggi	ng or bending? 🗀 ՝	Yes No
If floor is made of wire, is it larger than 1/8" diameter? 🖎 Yes 🗆	No	
WALLS:		
Any spaces or gaps big enough for an animal's feet or toes to pa	ss through or get	stuck? ≰Yes ☐ No
Any gaps large enough to allow a dog in an adjacent enclosure t	o access dogs in th	nis one? 🆰 Yes 🗆 No
FOOD/WATER:		
Is there food available? ★Yes ☐ No Is the food and food re-	ceptacle clean and	dry? KYes □ No
# of food receptacles Can all dogs in enclosure access fo	od receptacle at o	nce?□Yes ≦No
If no, explain: Round opening (i.e. food is moldy, food bowl is very dirty, etc.)		
Is there water available? ☑ Yes ☐ No Is the water pota	able? ☐ Yes ☐ No	
If no, explain: SpiCET (i.e., water is very dirty, water is cloudy and has a foul odor, e		
(i.e., water is very dirty, water is cloudy and has a foul odor, e	(C.)	

COMPATABILITY:
Any fighting or aggressive behavior between animals witnessed? Yes Mo
If yes, explain: ONE plugful pup STAME Fighty W/ MWS
Additional Notes/Findings: no Resting platform.
2 one toys to 10 dogs
LHIPPED PAINT CONCRETE TRANSITION/WALLS
MOLDY FOOD UNDER FOOD RELEPTALLE
47 × 62 × 73 OUT
Photo Log: 158 — 164
Evaluation conducted on 5 18 22 by: (Date)
A.K. THYLOR
(Print Name) (Signature)

Animal ID #: 9A 102 - 0

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	1
In-Field Exam Date: 5 19-22 Clinician(s):	ch5 Initials: AUJA
Breed: Beagle Color: TACOLOR	
Age / Birth: 17 weeks est./Act. (circle) Ear Tag / Tattoo #	* CNBCAN
Length: 22 ¹¹ (nose to tail) Height: 11 11	(top of the head)
IN-FIELD EXAM:	
Body Condition Score: 1 -Emaciated 2 - Very Thin	☐ 3 -Thin ☐ 4 - Ideal ☐ 5- Ideal
☐ 6 - Overweight ☐ 7 - Heavy	☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: NSF 1 2 3	□ 4
MEDICAL FINDINGS: NSF	
Recommended Treatment (that should be provided by Owner/Operat	cor) :
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he	
or other care to promptly alleviate a life threatening illness/injury or any	
removed promptly from the facility and placed in the designated third-p	
Nine Illand	
Examining Veterinarian:	(Signature)
Concurrence (for removal Only) :	(Signature)
Dr. Samantha Moffitt, Lead Vet	terinarian

IN-FIELD EXAM	1-VII	IEI	LUE	:X/	411	/
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ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 519-22 Clinician(s): Unichs Initials: AU/A
Breed: Beag Color: TRICO OR Neuter: Y/N (circle) Gender: M/F (circle)
Age / Birth: 12 week S est./Act. (circle) Ear Tag / Tattoo #: CAP
Length: 23" (nose to tail) Height: 12" (top of the head)
IN-FIELD EXAM:
Body Condition Score: ☐ 1 -Emaciated ☐ 2 - Very Thin ☐ 3 -Thin ☐ 4 - Ideal ☐ 5- Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3 ☐ 4
MEDICAL FINDINGS: NSF
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian: (Signature)
Concurrence (for removal Only) :(Signature)
Du Consorthe Meffith Load Veterinories

Animal ID #: 9A107-03

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 5-19-22 Clinician(s): U/1065 Initials. Initials. Initials.
Breed: Beagle Color: Tricolor Neuter: Y/N(circle) Gender: M/F(circle)
Age / Birth: 12 wecks est./Act. (circle) Ear Tag / Tattoo #: CAM
Length: (nose to tail) Height: (top of the head)
IN-FIELD EXAM: Body Condition Score:
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: NSF □ 1 □ 2 □ 3 □ 4 MEDICAL FINDINGS:
MEDICAL FINDINGS:
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian:
Concurrence (for removal Only) :(Signature)

Animal ID #: 9 A 102 - 04

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	1.1.
In-Field Exam Date: 5-19-22 Clinician(s):	hs Initials: AU/A
Breed: Bragu Color: TRICOLOR	_ Neuter: Y / 🎗 (circle) Gender: M / 🖟 (circle)
Age / Birth: 12 weekS est./Act. (circle) Ear Tag / Tattoo #	: CNA CLU
Length: (8" (nose to tail) Height: (21"	(top of the head)
IN-FIELD EXAM:	
Body Condition Score: 1 -Emaciated 2 - Very Thin	☐ 3 -Thin ☐ 4 - Ideal ☐ 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy	☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade:	□ 4
MEDICAL FINDINGS: NOF	
Recommended Treatment (that should be provided by Owner/Operator	or) :
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he	
or other care to promptly alleviate a life threatening illness/injury or any	
removed promptly from the facility and placed in the designated third-pa	
Examining Veterinarian: Mullrub, MID	(Signature)
Concurrence (for removal Only) :	(Signature)
Dr. Samantha Moffitt, Lead Veto	erinarian

Animal ID #: 9A102-05

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 5-19-22 Clinician(s): (1/10) Initials: AU/1
Breed: Bragle Color: The Color Neuter: Y/N (circle) Gender: M/F (circle)
Age / Birth: 12 weeks est./Act. (circle) Ear Tag / Tattoo #: CNA CLN
Length: 20" (nose to tail) Height: 13" (top of the head)
IN-FIELD EXAM:
Body Condition Score: ☐ 1 - Emaciated ☐ 2 - Very Thin ☐ 3 - Thin ☐ 4 - Ideal ☐ 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3 ☐ 4
MEDICAL FINDINGS: NSF
Recommended Treatment (that should be provided by Owner/Operator) :
□ Dog must be housed seperatly due to
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Minalline
Examining Veterinarian: (Signature)
Concurrence (for removal Only) :(Signature)
Dr. Samantha Moffitt, Lead Veterinarian

Animal ID #: 9410 2 - 06

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	
In-Field Exam Date: 5-19-22 Clinician(s):	Initials: AU/AS
Breed: Bragle Color: Tricolor	Neuter: Y / N (circle) Gender: M / E (circle)
Age / Birth: 12 weeks est./Act. (circle) Ear Tag / Tattoo #:	CNA CLP
Length: (nose to tail) Height:	(top of the head)
	M.
	9
7 7 7	
	4) 50
	7
IN-FIELD EXAM:	
Body Condition Score: 1 - Emaciated 2 - Very Thin	☐ 3 -Thin ☑ 4 - Ideal ☐ 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3	□ 8 - Obese □ 9 - Grossly Obese □ 4
just under skin on top of	head
Just wider san on top of	700
Recommended Treatment (that should be provided by Owner/Operator	A .
Recommended Treatment (that should be provided by Owner/Operator	1:
Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/s	
or other care to promptly alleviate a life threatening illness/injury or any s	
removed promptly from the facility and placed in the designated third-par	ty to receive humane care.
Examining Veterinarian: Auce (Muchs, MM)	(Signature)
Concurrence (for removal Only) :	(Signature)
Dr. Samantha Moffitt Lead Veter	inarian

Animal ID #: 94102 - 0 7

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	. /.
In-Field Exam Date: 5-19-22 Clinician(s): 11065	Initials: AU/A
Breed: Beagle Color: Theolon Neuter: Y (N (circle) Ge	ender: M (F(circle)
Age / Birth: 12 weeks est./Act. (circle) Ear Tag / Tattoo #: CNA CNB	
Length: 72" (nose to tail) Height: 12" (top of the head)	
IN-FIELD EXAM:	
Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin	
	- Grossly Obese
Dental Grade: NSF 1 2 3 4	
MEDICAL FINDINGS: NSF	1
Recommended Treatment (that should be provided by Owner/Operator) :	
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate vet	terinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this a	animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.	
Examining Veterinarian:(Signature)	
Concurrence (for removal Only) :(Signature)	

Animal ID #: 7A 10 2 - 8

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 5-19-22 Clinician(s): 1/1065 Initials: AU/A
Breed: Beagle Color: Tricolon Neuter: Y/N(circle) Gender: M/F(circle)
Age / Birth: 17 (A) -eeks est./Act. (circle) Ear Tag / Tattoo #: C_A/A - C_LR
Length: 22" (nose to tail) Height: (2 " (top of the head)
IN-FIELD EXAM:
Body Condition Score: ☐ 1 -Emaciated ☐ 2 - Very Thin ☐ 3 -Thin ☐ 4 - Ideal ☐ 5- Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: NSF □ 1 □ 2 □ 3 □ 4
MEDICAL FINDINGS: (1) 2mm Scab on right ear distal pinna
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian:
Concurrence (for removal Only) :(Signature)
Dr. Samantha Moffitt, Lead Veterinarian

Animal ID#: 9A 102-09

Case #: HY-3301-0150

Location: Cumberland, VA

	DICAL RECORD - DOG	ician(s):	1065	Init	ials: AU/A
	le Color:				
Age / Birth: 12 we	ek Sest./Act. (circle)	Ear Tag / Tattoo #:	CABC	AM AS	CNACL
	(nose to tail)		(top of t		
		-	a		
	by S				
IN-FIELD EXAM:					
Body Condition Score:	☐ 1 -Emaciated	2 - Very Thin	☐ 3 -Thin	☐ 4 - Ideal	
Dental Grade:	☐ 6 - Overweight	☐ 7 - Heavy	□ 8 - Obese	□ 9 - Gross	ly Obese
MEDICAL FINDINGS:	NSF 1			· CL	lar.
WEDICAL FINDINGS.	NOT NO	(1) 1/2 cm	Ista Dinno		en.
		CI	Brac pine		
Recommended Treatme	ent (that should be prov	rided by Owner/Operato	or) :		
☐ Dog must be housed					
	nd that this animal is in a				
	ly alleviate a life threater the facility and placed in				needs to be
Examining Veterinarian	: _ allee le	luch, uno	(Signature)		
Concurrence (for remov	val Only) :		(Signat	ure)	

Animal ID #: 9A 102 - 1 0

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 5-19-22 Clinician(s): Ulriche Initials: AU/A
Breed: <u>Bragk</u> Color: <u>TRILOION</u> Neuter: Y/N(circle) Gender: M/F(circle)
Age / Birth: 12 weeks est./Act. (circle) Ear Tag / Tattoo #: CNA CNA
Length: (nose to tail) Height: (top of the head)
IN-FIELD EXAM:
Body Condition Score: ☐ 1 - Emaciated ☐ 2 - Very Thin ☐ 3 - Thin ☐ 4 - Ideal ☐ 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade:
MEDICAL FINDINGS: NSF
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian: Alle Ulricles WMD (Signature)
Concurrence (for removal Only) :(Signature)
Dr. Samantha Moffitt, Lead Veterinarian

ATTACHMENT 2 – 9A105 Enclosure Evaluation Form and In-Field Exam Forms

ENCLOSURE EVALUATION	ENCLOSURE ID: 9 A 105
	CASE #: HY-3301-0150
	LOCATION: Cumberland, VA
MEASUREMENTS: 11 Size: Length 49 Width 4 Height 63	Temperature in building:83
	remperature in building:
Number of animals in enclosure: 10	- AAAS -AZT AAAAT - AS
Animal ID's: 9A105-01 9A105-07 9A105-08	94105-0-1 14105-01
CENEDAL	7/105-10 9/1/5-10
Type of construction: weided	
Is enclosure dry?	
Is enclosure clean and sanitary?	
Adequate ventilation?	
Well lit?	
Adequate protection from the weather provided? $\cancel{\square}$ Yes \square No	
Are there any sharp points or edges? Yes No	
Is the enclosure secure? ☐ Yes ☐ No	
Drainage/disposal system operating properly? ☐ Yes ☐ No	lA
FLOORING:	
Any spaces or gaps big enough for an animal's feet or toes to pa	ass through or get stuck? ☑ Yes ☐ No
Flooring made of material that can be sanitized? ✓ Yes No	
Is the flooring secured down? ☐ Yes ☐ No	ng or bending? ☐ Yes⊠No
If floor is made of wire, is it larger than 1/8" diameter? Yes □	`
WALLS:	
Any spaces or gaps big enough for an animal's feet or toes to pa	ass through or get stuck? ✓ Yes No
Any gaps large enough to allow a dog in an adjacent enclosure t	o access dogs in this one? Yes ☐ No
FOOD/WATER:	ALL
Is there food available? Yes \(\sigma \) No \(\sigma \) Is the food and food red	ceptacle clean and dry? 🔥es 🗆 No
# of food receptacles Can all dogs in enclosure access fo	od receptacle at once? ☐ Yes 😾 No
If no, explain: Round opening (i.e. food is moldy, food bowl is very dirty etc.)	
Is there water available? tes ☐ No Is the water pota	able? ☐ Yes ☐ No
If no, explain: SPIKET (i.e., water is very dirty, water is cloudy and has a foul odor, e	tc.)

COMPATABILITY:	
Any fighting or aggressive behavior between animals witne	ssed? 🗆 Yes 💢 No
If yes, explain:	
Additional Notes/Findings: No Restina	platform
BUILD UP TRANSMAN	
DOG EATING PLANTIC FLA	AP IN TRANSTON
DUT W-47 D-73 4-62	
Photo Log: 177-184	
,	
Evaluation conducted on $5/(8/22)$ by: (Date)	
A.K. TMUR	
(Print Name) (Sig	nature)

			Animal ID	#: <u>7A105 - 0</u>	2/
N-FIELD EXAM			Case #:	HY-3301-0150	
•			Location: _	Cumberland, VA	
ANIMAL PATIENT MEDICAL	PECOPO - DOG				
		sian(s): m c A ad		Initials: 11 A	~ -
In-Field Exam Date: <u>写川別る</u> Breed: <u>しぬのに</u>					
				cie) Gender: M A (circle)	,
		Ear Tag / Tatton #		- L	_
Length: <u>20</u>	(nose to tail) H	eight: / 6	(top of the	e nead)	
)		_		
	/ /		7		
IN-FIELD EXAM:					
	1 -Emaciated 6 - Overweight	☐ 2 - Very Thin ☐ 7 - Heavy	☐ 3 -Thin ☐ 8 -Obese		П
	NSF 1	□ 2 □ 3		☐ 3 - Glossik Onese	_
	12F	<u> </u>			_
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					_
					_
					_
					_
					_
Recommended Treatment (tha	at should be provid	led by Owner/Operato	or) :		<u> </u>
☐ Dog must be housed sepera	tly due to				_
☐ By signing below, I find that	this animal is in ac	ute distress, that is, he	she requires immed	iate veterinary treatment	
or other care to promptly allevia	ate a life threateni	ng illness/injury or any	suffering, and as suc	h, this animal needs to be	
removed promptly from the fac			-	-	
Examining Veterinarian:			(Signature)		
Comprise of the manageral Control			let	1	

Animal ID#: 9A105-02

N-FIELD EXAM			Case #:	HY-3301-0150	_
'			Location:	Cumberland, VA	_
ANIMAL PATIENT MED	ICAL RECORD - DOG				
		ician(s): McAndr	ew	Initials:	5
Breed: 6009U	Color: le19	ch tan white	Neuter: Y/(N)(ci	rcle) Gender: M /F circle)	- C/
Age Birth: 12WKs				, , , , , , , , , , , , , , , , , , , ,	
Length: 3				he head)	-
		<u> </u>	, A	•	
	2/9 5				
			7		
			(AC		
IN-FIELD EXAM: Body Condition Score:	☐ 1 -Emaciated	☐ 2 - Very Thin	3 -Thin	☐ 4 - Ideal ☐ 5- Ideal	1
Body Condition Score.	☐ 6 - Overweight		□ 8 - Obese	_	
Dental Grade:	✓ NSF □ 1				1
MEDICAL FINDINGS:	NSF				_
					-
				· · · · · ·	_
					_
					-
					_
···					_
					_
Recommended Treatmen	t (that should be prov	ided by Owner/Operat	or) :		•
☐ Dog must be housed s	seperatly due to				- -
☐ By signing below, I find	l that this animal is in a	cute distress, that is, he	e/she requires imme	diate veterinary treatment	
or other care to promptly removed promptly from t				nch, this animal needs to be ane care.	
Examining Veterinarian:			(Signature)		
Concurrence (for remova	l Only) :		(Signatı	ıre)	

IN-FIELD	EXAM
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Animal ID #: 9A105-03

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	
In-Field Exam Date: 5/18/22 Clinician(s): Mcandrew	Initials: MA & F
Breed: 66agle Color: 61ach tan white Neuter:	Y / (N)(circle) Gender: M (P)(circle)
Regev Birth: 1WKs ST/Act. (circle) Ear Tag / Tatto #: CNA	CLA
	(top of the head)
IN-FIELD EXAM:	·*
Body Condition Score: 1 -Emaciated 2 - Very Thin 3 -Th	nin 24 - Ideal 1 5- Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - O	bese 🔲 9 - Grossly Obese
Dental Grade: ✓ NSF □ 1 □ 2 □ 3 □ 4	
MEDICAL FINDINGS: for ear right side	
<u>'</u>	
·	
Recommended Treatment (that should be provided by Owner/Operator) :	
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/she requir	es immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, a	and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive	ive humane care.
Examining Veterinarian:(Sign	ature)
Concurrence (for removal Only) :	_(Signature)
Dr. Samantha Moffitt, Lead Veterinarian	

N-FIELD EXAM	Animal ID #:
ANIMAL PATIENT MEDICAL RECORD - DOG	
In-Field Exam Date: 5/18/22 Clinician(s): McAndrew	Initials: _ <i>M A</i>
Age/Birth: LIWK) (est)/Act. (circle) Ear Tag / (atto) #: C	iter: Y (N)(circle) Gender: M (F)(circle)
Length: 20.5 (nose to tail) Height: 16	(top of the head)
IN-FIELD EXAM:	······································
	3 -Thin
Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3 [□ 4
MEDICAL FINDINGS: ひらア	
Recommended Treatment (that should be provided by Owner/Operator) : _	
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/she	requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any sufferemoved promptly from the facility and placed in the designated third-party to	-
Examining Veterinarian:	(Signature)
Concurrence (for removal Only) :	(Signature)

IN-FIELD EXAN

Animal ID#: 9A105-05 Case #: HY-3301-0150 Location: <u>Cumberland, VA</u>

	ANIMAL PATIENT MEDICAL RECORD - DOG
	In-Field Exam Date: 5/18/22 Clinician(s): McAnarew Initials: MA
	Breed: 6eagle Color: 612CK Tan white Neuter: Y (N)(circle) Gender: M (E)circle)
	Ree/ Birth: 10 いと est./Act. (circle) Ear Tag / Tattoo #: CNACLE
	Length: 22 (nose to tail) Height: 15.5 (top of the head)
	IN-FIELD EXAM:
***	Body Condition Score: ☐ 1 -Emaciated ☐ 2 - Very Thin ☐ 3 -Thin ☐ 4 - Ideal ☐ 5- Ideal
	☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
	Dental Grade: NSF 1 2 3 4
	MEDICAL FINDINGS: NS F
	Recommended Treatment (that should be provided by Owner/Operator) :
	Dog must be housed seperatly due to
	By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
	or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
_	removed promptly from the facility and placed in the designated third-party to receive humane care.
-	Examining Veterinarian: (Signature)
	Concurrence (for removal Only) :(Signature)
	Dr. Samantha Moffitt Lead Veterinarian

	Animal ID	#: <u>9A105-06</u>	2
IN-FIELD EXAM	Case #:	HY-3301-0150	-
	Location:	Cumberland, VA	-
ANIMAL PATIENT MEDICAL RECORD - DOG			
In-Field Exam Date: 5/11/22 Clinician(s): McAndrew		Initials: MA	. 81
Breed: beagle Color: 619(K red white Neut	ter: Y/N/(cir	cle) Gender: M /(F)circle)	,
Age / Birth: 12 いに est./Act. (circle) Ear Tag / Tettoの#:	NACJF		_
Length: 2-3 (nose to tail) Height: i 4		ne head)	_
	M		
IN-FIELD EXAM: Body Condition Score: 1 - Emaciated 2 - Very Thin	3 -Thin	4 - Ideal 5 - Ideal	1
	8 - Obese		
]4		1
MEDICAL FINDINGS: NSF			-
	-		-
			_
		·	-
			_
	·- · · · · · · · · · · · · · · · · · ·		-
			-
			-
Recommended Treatment (that should be provided by Owner/Operator) :			•
Dog must be housed seperatly due to			-
☐ By signing below, I find that this animal is in acute distress, that is, he/she re	equires imme	diate veterinary treatment	
or other care to promptly alleviate a life threatening illness/injury or any suffer removed promptly from the facility and placed in the designated third-party to	•	•	
	(Signature)		
Concurrence (for removal Only) :	(Signatu	re)	

N-FIELD EXAM	Animal ID #: 9A105-07 Case #: HY-3301-0150 Location: Cumberland, VA
ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5/18/22 Clinician(s): M(Andrew Breed: 6296 Color: 61906 Tan white Neute Age/Birth: 11wks (est)/Act. (circle) Ear Tag/Tattod #: Ch Length: 20.5 (nose to tail) Height: 14.5	er: Y (N)(circle) Gender: M (P)(circle)
IN-FIELD EXAM: Body Condition Score:	-Thin 24 - Ideal 5- Ideal
	- Obese 🔲 9 - Grossly Obese
Dental Grade: NSF 1 2 3	4
MEDICAL FINDINGS: NSF	
	
Recommended Treatment (that should be provided by Owner/Operator) :	
	
□ Dog must be housed seperatly due to	
□ By signing below, I find that this animal is in acute distress, that is, he/she reconstructed or other care to promptly alleviate a life threatening illness/injury or any suffering the sufficient of the s	
removed promptly from the facility and placed in the designated third-party to r	
Examining Veterinarian:(S	
Concurrence (for removal Only) :	

N-FIELD EXAM	Animal ID #:
ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5/18/22 Clinician(s): McAndrew Breed: 6eagle, Color: 64664 tan white Ne	uter: Y N (circle) Gender: M /F (circle)
Age Birth: 10 wks est/Act. (circle) Ear Tag / (attog #: (nose to tail) Height: /	(top of the head)
IN-FIELD EXAM:	2 This Coff Ideal C 5 Ideal
] 3 -Thin
	□4
MEDICAL FINDINGS: NSF	
Recommended Treatment (that should be provided by Owner/Operator):	
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/she	
or other care to promptly alleviate a life threatening illness/injury or any sufferemoved promptly from the facility and placed in the designated third-party t	
Examining Veterinarian:	_ (Signature)
Concurrence (for removal Only) :	(Signature)

N-FIELD EXAM	Case #:	<u>9A105-6</u> HY-3301-0150 Cumberland, VA	7
ANIMAL PATIENT MEDICAL RECORD - DOG			
In-Field Exam Date: 5/18/22 Clinician(s): McAndrew		Initials: MA	G,
Breed: Ueagle Color: Glacu tan white Ne	uter: Y/Micircle	e) Gender: M //B(circle)	۲,
Age Birth: 12 WK3 (est) Act. (circle) Ear Tag / (Tattog #: (_	, common m, (0 (amond,	
Length: 19.5 (nose to tail) Height: 16	(top of the	head)	
IN-FIELD EXAM: Body Condition Score:] 3 -Thin [4 - Ideal ☐ 5- Ideal	
	-	☐ 9 - Grossly Obese	
Dental Grade: ☑ NSF ☐ 1 ☐ 2 ☐ 3	□4		
MEDICAL FINDINGS: NSF			
Recommended Treatment (that should be provided by Owner/Operator) : _			
☐ Dog must be housed seperatly due to			
□ By signing below, I find that this animal is in acute distress, that is, he/she	requires immedia	ate veterinary treatment	
or other care to promptly alleviate a life threatening illness/injury or any suffe			
removed promptly from the facility and placed in the designated third-party to	o receive humane	e care.	
Examining Veterinarian:	_ (Signature)		
Concurrence (for removal Only) :	(Signature)	
Dr. Samantha Moffitt, Lead Veterina		,	

IN-FIELD EXAM	
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Animal ID #: 9A 105 - 10

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MED	ICAL RECORD - DOG				
In-Field Exam Date: 3/1	8/22 Clinician(s): <u>McAnare</u>	ew	Initi	
Breed: beagle	Color: 619CK	red white	_ Neuter: Y N (ci	rcle) Gender:	M /(F)circle)
Age)/ Birth: 12wK	est)/Act. (circle)	Ear Tag / (attoo)#	:_CNACKZ	<u>-</u>	
	(nose to tail) Heigh		(top of ti		
IN-FIELD EXAM: Body Condition Score:	1 -Emaciated	2 - Very Thin	3 -Thin	☑ 4 - Ideal	☐ 5- Ideal
	☐ 6 - Overweight ☐] 7 - Heavy	☐ 8 - Obese	☐ 9 - Grossl	y Obese
Dental Grade:	✓ NSF □ 1 □	2 🗆 3	□4	· ·	
MEDICAL FINDINGS:	NSF				
				.=.	
	<u> </u>				
Recommended Treatmen	at (that should be provided	by Owner/Operate	or) :		
☐ Dog must be housed s	seperatly due to		·		
_ •	that this animal is in acute				
	alleviate a life threatening il				
• • •	he facility and placed in the o			. •	
Examining Veterinarian:			·		
Concurrence (for removal	l Only) :		(Signat	ure)	
- Silvani Silvani (ali tambia)			erinarian		

ATTACHMENT 3 – 9A124 Enclosure Evaluation Form and In-Field Exam Forms

ENCLOSURE EVALUATION	ENCLOSURE ID: 9A 124			
	CASE #: HY-3301-0150			
	LOCATION: Cumberland, VA			
MEASUREMENTS:	<i>7</i> 5			
Size: Length 49 Width 47 Height 59 Number of animals in enclosure: 9	Temperature in building:			
Number of animals in enclosure:	_			
Animal ID's: 9A124-01, 9A124-02	9A124-03 9A124-04,			
9A124-05 9A124	f-06			
GENERAL:				
Type of construction: Well				
Is enclosure dry?☐Yes☐No Is enclosure clean and sanitary?☐YesNo				
Is enclosure clean and sanitary? ☑ Yes ☑ Yo				
Adequate ventilation? Yes □ No				
Well lit? ☑ Yes ☐ No				
Adequate protection from the weather provided? ✓ Yes ☐ No				
Are there any sharp points or edges? ☐ Yes ☐ No				
Is the enclosure secure? ☐Yes ☐ No				
Drainage/disposal system operating properly? ✓ Yes ■ N /	'A			
FLOORING:				
Any spaces or gaps big enough for an animal's feet or toes to pa	ss through or get stuck? ☐ Yes ☑ No			
Flooring made of material that can be sanitized? ☐ Yes ☐ No				
Is the flooring secured down? ✓ Yes ☐ No Is the floor sagging or bending? ☐ Yes ☐ No				
If floor is made of wire, is it larger than 1/8" diameter? ☑Yes ☐ No				
WALLS:				
Any spaces or gaps big enough for an animal's feet or toes to pa	ss through or get stuck? 🜠 Yes 🗷 No			
Any gaps large enough to allow a dog in an adjacent enclosure t	o access dogs in this one? XYes □No			
FOOD/WATER:	Au			
Is there food available?	ceptacle clean and dry? ☐Yes ☐No			
# of food receptacles Can all dogs in enclosure access fo				
If no, explain: FOOD POIT too Swall for all . (i.e. food is moldy, food bowl is very dirty, etc.)	loss to access a same tim.			
Is there water available? ☐ Yes ☐ No Is the water pota				
If no, explain: 1 SPIKET				

COMPATABILITY:
Any fighting or aggressive behavior between animals witnessed? ☐ Yes ☑ No
If yes, explain:
Additional Notes/Findings: - No resting platform
- No resting platform - No se Backet, interior, apper Left high conver
BUILD UP IN TRANSITION
FOOD UNDER FREEDER
47 × 62 × 73 OUT
Photo Log:
Evaluation conducted on $05 \cdot 19 \cdot 22$ by: (Date)
(Print Name) (Signature)

Animal ID #: 9A 124-01

Case #: HY-3301-0150

Location: Conberland W

ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5-20-22 Clinician(s): Ulric	hs Initials: AU/1			
Breed: Beagle Color: TR	Neuter: Y/N(circle) Gender: M/F(circle)			
Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #	- Neuter. 17(N)(circle) dender. Wy)(circle)			
Age / Birth: 4 months est./Act. (circle) Ear rag / rattoo +	(top of the head)			
Length: 24" (nose to tail) Height: 13"	(top of the head)			
	M			
(M)				
	CC CC			
V				
IN-FIELD EXAM: Body Condition Score:	☐ 3 -Thin			
	□ 8 - Obese □ 9 - Grossly Obese			
☐ 6 - Overweight ☐ 7 - Heavy Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3	4			
MEDICAL FINDINGS: ALSE				
WEDICAL FINDINGS.				
Recommended Treatment (that should be provided by Owner/Opera	tor) :			
Dog must be housed seperatly due to				
☐ By signing below, I find that this animal is in acute distress, that is, h				
or other care to promptly alleviate a life threatening illness/injury or an				
removed promptly from the facility and placed in the designated third-				
Examining Veterinarian:	(Signature)			
Concurrence (for removal Only) :	(Signature)			

Case #: HY-3301-0150
Location: Combeland A

ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5 - 20 - 22 Clinician(s): 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/
Breed: 17 Color: 1 Cl Neuter. 17 (Notifice) Gender. W/ (Circle)
Age / Birth: 4 nonth S est./Act. (circle) Ear Tag / Tattoo #: CM L CA //
Length: (nose to tail) Height: (top of the head)
IN-FIELD EXAM: Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin 4 - Ideal 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade:
MEDICAL FINDINGS: NSF
Recommended Treatment (that should be provided by Owner/Operator) :
Recommended Treatment (that should be provided by Owner/Operator) :
□ Dog must be housed seperatly due to
 □ Dog must be housed seperatly due to □ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
 □ Dog must be housed seperatly due to □ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be

IN-FIELD	EXAM
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Case #: HY-3301-0150
Location: Consultant W

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: $S - 20 - 32$ Clinician(s): U1 1ch S Initials: AU/A
Breed: Beagle Color: TRJ Neuter: Y N (circle) Gender: M (F)(circle)
Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #: CML CKK
Length: (nose to tail) Height: (top of the head)
IN-FIELD EXAM:
Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin 4 - Ideal 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: NSF 1 2 3 4
MEDICAL FINDINGS: 1
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
 □ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
(NIA) AA A A COOK
Examining Veterinarian: (Signature)
Concurrence (for removal Only) :(Signature)
Dr. Samantha Moffitt, Lead Veterinarian

Animal ID #: 9A 124-04

Case #: HY-3301-0150

Location: Cumberland W

In-Field Exam Date: 5-20-22 Clinician(s): Ulrichs Initials: AUA
Breed: Color: Clinician(s): Neuter: Y N (circle) Gender: M (F (circle))
Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #: CML CKT
Length: (nose to tail) Height: (top of the head)
Length: (nose to tail) Theight
IN-FIELD EXAM: Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin 4 - Ideal 5 - Ideal
□ 6 - Overweight □ 7 - Heavy □ 8 - Obese □ 9 - Grossly Obese
Dental Grade: NSF □ 1 □ 2 □ 3 □ 4
MEDICAL FINDINGS: NSF
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian: (Signature)
Concurrence (for removal Only) :(Signature)
Dr. Camantha Moffitt Load Veterinarian

IN-FIELD E	XA	N	ı
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Case #: HY-3301-0150
Location: Cumberland W

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 5-20-22 Clinician(s): U)/1Ch S Initials: AU/I
Breed: Bragu Color: TR Neuter: Y/N(circle) Gender: M/F(circle)
Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #: CML CMB
Length: 25" (nose to tail) Height: 5" (top of the head)
IN-FIELD EXAM: Body Condition Score:
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: NSF 1 2 3 4
MEDICAL FINDINGS: NSF
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian: (Signature)
Examining Veterinarian: (Signature) Concurrence (for removal Only): (Signature)

IN-	FI	EL	D	EX	Ά	N	1
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Animal ID #: 94124-06

Case #: HY-3301-0150

Location: Comberland W

	ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5-20-22 Clinician(s): Ulnchs Initials: Alf
	Breed: Beag Color: TR/ Neuter: Y/N circle) Gender: M/F (circle)
	Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #: CML CML
	Length: (nose to tail) Height: (top of the head)
	Length (nose to tall) height
)	IN-FIELD EXAM: Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin 4 - Ideal 5 - Ideal
	□ 6 - Overweight □ 7 - Heavy □ 8 - Obese □ 9 - Grossly Obese
	Dental Grade: NSF 1 2 3 4
	MEDICAL FINDINGS: NSF
	Recommended Treatment (that should be provided by Owner/Operator) :
	□ Dog must be housed seperatly due to
	☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
	or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
)	removed promptly from the facility and placed in the designated third-party to receive humane care.
	Examining Veterinarian: (Signature)
	Concurrence (for removal Only) :(Signature)
	Dr. Samantha Moffitt, Lead Veterinarian

IN-FIELD EXAN		N	l-	F	ΙE	LD	EX	ΑI	V		
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Animal ID #: 9A1Z4-07

Case #: HY-3301-0150

Location: Cumberland M

ANIMAL PATIENT MEDICAL RECORD - DOG
In-Field Exam Date: 5-20-22 Clinician(s): Initials: AU/
Breed: Beag Color: TR Neuter: Y/N(circle) Gender: M/F(circle)
Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #: CML CLW
Length: (nose to tail) Height: (top of the head)
IN-FIELD EXAM: Body Condition Score:
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: NSF 1 2 3 4
MEDICAL FINDINGS:
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian: (Signature)
Concurrence (for removal Only) :(Signature)

Case #: HY-3301-0150
Location: Cumberland VA

ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5-20-22 Clinician(s): Ulach S Initials: Aulto
Breed: Deagle Color: TR Neuter: Y/N(circle) Gender: M/E(circle)
Age / Birth: 4 month S est./Act. (circle) Ear Tag / Tattoo #: CML CMP
Length: (nose to tail) Height: (top of the head)
Length: (nose to tail) Theight (top or the total)
IN-FIELD EXAM:
Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin 4 - Ideal 5 - Ideal
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3 ☐ 4
MEDICAL FINDINGS: ALSE
- 17
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian: (Signature)
Concurrence (for removal Only) :(Signature)

Animal ID#: 9/124-09

Case #: HY-3301-0150

Location: Comberland W

li B	ANIMAL PATIENT MEDICAL RECORD - DOG n-Field Exam Date: 5-20-22 Clinician(s): Ulach S Breed: Beagle Color: TRI Neuter: Y/Nicircle) Gender: M/Ficircle) Age / Birth: 4 months est./Act. (circle) Ear Tag / Tattoo #: CML CKD Length: 24" (nose to tail) Height: 14" (top of the head)
	IN-FIELD EXAM: Body Condition Score:
	Body Condition Score: 1 -Emaciated 2 - Very Thin 3 - Thin 4 4 - Ideal 5 - Ideal 5 - Ideal 5 - Ideal 5 - Ideal 6 - Overweight 7 - Heavy 8 - Obese 9 - Grossly Obese
-	Dental Grade: ☑ NSF ☐ 1 ☐ 2 ☐ 3 ☐ 4
L	MEDICAL FINDINGS: AISE
-	
-	
•	
•	
3	
•	
	Recommended Treatment (that should be provided by Owner/Operator) :
	Recommended Treatment (that should be provided by Owner/Operator) :
	□ Dog must be housed seperatly due to
	 □ Dog must be housed seperatly due to
	 □ Dog must be housed seperatly due to
	□ Dog must be housed seperatly due to □ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be removed promptly from the facility and placed in the designated third-party to receive humane care.
	 □ Dog must be housed seperatly due to

ATTACHMENT 4 – 10A36 Enclosure Evaluation Form and In-Field Exam Forms

ENCLOSURE EVALUATION	ENCLOSURE ID: 10A36
	CASE #: HY-3301-0150
	LOCATION: Cumberland, VA
MEASUREMENTS: Size: Length 49 /2 Width 47 /2 Height 63	Temperature in building: 77.2
Number of animals in enclosure:	_
Animal ID's: 10A36-01 10A36-02 10A36-03	10A36 - 04 10A36 - 05
10 A 36 - D6 10 A 36 - O7 10 A 36 - OB	10A36-09
GENERAL:	
Type of construction: WEDER	
Is enclosure dry (Yes □ No	
ls enclosure clean and sanitary? ☐ Yes ♠No	
Adequate ventilation? Yes □ No	
Well lit? (Yes □ No	
Adequate protection from the weather provided ✓ Yes ☐ No	
Are there any sharp points or edges? ⚠ Yes ☐ No	
Is the enclosure secure? Yes □ No	
Drainage/disposal system operating properly? ☐ Yes ☐ No N	A
FLOORING:	
Any spaces or gaps big enough for an animal's feet or toes to pa	ss through or get stuck?⊠Yes □ No
Flooring made of material that can be sanitized? (Yes ☐ No	•
Is the flooring secured down (ng or bending?⁄XíYes □ No
If floor is made of wire, is it larger than 1/8" diameter? Yes	No
WALLS:	
Any spaces or gaps big enough for an animal's feet or toes to pa	ss through or get stuck? ☐ Yes Y No
Any gaps large enough to allow a dog in an adjacent enclosure to	o access dogs in this one? Yex No
FOOD/WATER:	
Is there food available? ✓ Yes ☐ No Is the food and food rec	ceptacle clean and dry? (Al Yes ロNo ALMOST GONE
# of food receptacles Can all dogs in enclosure access for	od receptacle at once? ☐ Yes ⚠No
If no, explain:	DOINT ROUND VENT
Is there water available Yes □ No Is the water pota If no, explain: 1501 150	able? ☐ Yes ☐ No
(i.e., water is very dirty, water is cloudy and has a foul odor, et	ic.)

COMPATABILITY:
Any fighting or aggressive behavior between animals witnessed? Tyes No
If yes, explain:
Additional Notes/Findings:
no resting forms
BUILD UP OUTSIDE FOODER
BULD UP IN TRANSITION - CHIPPING PAINT
BUILD UP WALLS
,
47 x 62 x 73 OVT
Photo Log:
244-249
Evaluation conducted on 05 · 19 · 22 by: (Date)
(Date)
A K TOWING
A.K. TAYLOR (Print Name) (Signature)

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Animal ID #: 10 A 3 La - 0)

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5 18 a a Clinician(s): Kuzds	Initials: KK MW
Breed: Beck to white	leuter: Y/(N)circle) Gender: M/ F (circle)
Age/ Birth: 14 wells (est/Act. (circle) Ear Tag / Tattoo #:)	CNA CHJ
Length: 33 INCHES (nose to tail) Height: 18 INCHES	(top of the head)
Congress of the state of the st	<u> </u>
~	□ 3 -Thin □ 4 - Ideal
Dental Grade: X NSF 1 2 3	4 .
MEDICAL FINDINGS:	
CONL	
	
Recommended Treatment (that should be provided by Owner/Operator)	:
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/sh	
or other care to promptly alleviate a life threatening illness/injury or any su	ffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party	y to receive humane care.
Examining Veterinarian:	(Signature)
Concurrence (for removal Only) :	(Signature)

IN-FIELD EXAM

Animal ID #: 10A36-00

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	1.11
In-Field Exam Date: 5) 18) 22 Clinician(s): K~2da>	Initials: KK MA
Breed: ハラとゅうパ Color: ハラビバム サルハンハ・ハ Neuter: Y/N Xo	circle) Gender:M/ F (circle)
Age/ Birth: 14 veeks (st./Act. (circle) Ear Tag (Tattoo #:) CHA C	HH
	the head)
IN-FIELD EXAM:	
Body Condition Score: 1 - Emaciated 2 - Very Thin 3 - Thin 6 - Overweight 7 - Heavy 8 - Obese	☐ 4 - Ideal ☐ 5- Ideal ☐ 9 - Grossly Obese
Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3 ☐ 4	
MEDICAL FINDINGS:	
₩ N L	
	······································
Recommended Treatment (that should be provided by Owner/Operator) :	د.
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that is, he/she requires imm	ediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as s	uch, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive hum	nane care.
Examining Veterinarian: (Signature)	
Concurrence (for removal Only) :(Signature)	ture)
Dr. Samantha Moffitt, Lead Veterinarian	

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Animal ID #: 10 A 3 6 - 0 3

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5 18 22 Clinician(s): K Breed: BRAND Color: Black ton w	フルバグ Noutor: V/(N)/circle) Conder:(Ni)/ E/circle)
Age Birth: 14 いととと est)/Act. (circle) Ear Tag / (Length: つしょうじょう (nose to tail) Height: 14 い	attoo # CNA CHI (top of the head)
IN-FIELD EXAM:	
Body Condition Score: 1 -Emaciated 2 - Very T	
☐ 6 - Overweight ☐ 7 - Heave	/ □ 8 - Obese □ 9 - Grossly Obese □ 3 □ 4
MEDICAL FINDINGS:	<u></u>
INDICAL PINDINGS.	
Recommended Treatment (that should be provided by Owner/0	Operator) :
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, that	t is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury	or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated	third-party to receive humane care.
Examining Veterinarian:	(Signature)
Concurrence (for removal Only) :	
De Compatho Maffith La	

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-			_		_	

Animal ID #: 10 A 3 16 - 8 4 Case #: HY-3301-0150
Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5 18 22 Clinician(s): Kuzdas Initials: KK MW
Breed: 15 6 - 1 C Color: Walk white tan Neuter: Y (N)circle) Gender: M/F (circle)
Age Birth: 14weeks est/Act. (circle) Ear Tag / Tattoo #: CNA CFS
Length: Ources (nose to tail) Height: 14 inches (top of the head)
Length (nose to tany rieight (top or the nead)
IN-FIELD EXAM: Body Condition Score:
☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese
Dental Grade:
MEDICAL FINDINGS:
Swall leceration with scub un
inside of left ear
Recommended Treatment (that should be provided by Owner/Operator) :
☐ Dog must be housed seperatly due to
□ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the designated third-party to receive humane care.
Examining Veterinarian:(Signature)
Concurrence (for removal Only):(Signature)
Dr. Samantha Moffitt, Lead Veterinarian

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Animal ID #: 10 A 3 6 - 05

Case #: HY-3301-0150

Location: Cumberland, VA

(ANIMAL PATIENT MEDICAL RECORD - DOG In-Field Exam Date: 5 1812
ز	IN-FIELD EXAM: Body Condition Score:
	MEDICAL FINDINGS: WN-
	Recommended Treatment (that should be provided by Owner/Operator) :
	□ Dog must be housed seperatly due to □ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be removed promptly from the facility and placed in the designated third-party to receive humane care.
,	Examining Veterinarian:(Signature)
•	Concurrence (for removal Only) :(Signature)
	D. C and L. M Effect L. and Makaning wing

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Animal ID #: 10 A 3 6 - 0 6

Case #: HY-3301-0150

Location: Cumberland, VA

Age / Birth: 14 wo eal() Est./Act. (circle) Ear Tag/Ta	Neuter: Y/(V)(circle) Gender: (M)/ F (circle)
IN-FIELD EXAM:	
Body Condition Score: 1 - Emaciated 2 - Very Ti	
☐ 6 - Overweight ☐ 7 - Heavy	
	3 4
MEDICAL FINDINGS:	
	
	
	
	
Recommended Treatment (that should be provided by Owner/C	Operator) :
Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distress, tha	
or other care to promptly alleviate a life threatening illness/injury	
removed promptly from the facility and placed in the designated t	
Examining Veterinarian:	(Signature)
Concurrence (for removal Only) :	(Signature)
Du Consouthe Maffitt La	ad Makasta asta a

Animal ID#: 10A36.07 Case #: HY-3301-0150 Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	Kuzdas Initials: KK MW
In-Field Exam Date: 7 18122 Clinician(s):	Initials: Fix Volvite Neuter: Y (N)circle) Gender: M F (circle)
Breed: Beasie Color: bleck +	Tag Tattoo : CNA CHK
	ag / Tattoo 歩: (top of the head)
Length: 34 inches (nose to tail) Height: 1	(top of the nead)
IN-FIELD EXAM:	
	Very Thin ☐ 3 -Thin ☐ 4 - Ideal ☐ 5- Ideal
☐ 6 - Overweight ☐ 7 -	Heavy 🔲 8 - Obese 🗎 9 - Grossly Obese
Dental Grade: ☐ NSF ☐ 1 ☐ 2	□ 3 □ 4
MEDICAL FINDINGS:	
UNL	
Recommended Treatment (that should be provided by Ov	wner/Operator) :
☐ Dog must be housed seperatly due to	
☐ By signing below, I find that this animal is in acute distre	ess, that is, he/she requires immediate veterinary treatment
or other care to promptly alleviate a life threatening illness	/injury or any suffering, and as such, this animal needs to be
removed promptly from the facility and placed in the design	nated third-party to receive humane care.
Examining Veterinarian:	(Signature)
Concurrence (for removal Only) :	(Signature)
	fitt Load Votorinarian

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IN-F			$ \sim$	_	v

Animal ID #: 10 4 3 10 - 13 8

Case #: HY-3301-0150

Location: Cumberland, VA

ANIMAL PATIENT MEDICAL RECORD - DOG	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
In-Field Exam Date: 5/18/22 Clinician(s): Kuzd	197 Initials: KK M		
Breed: 19-60-916 Color: 4916-9-1-101-101-101-101-101-101-101-101-101	_ Neuter: Y (N)circle) _ Gender: W/ F (circle)		
(Age)/ Birth: 14 wecks (st)/Act. (circle) Ear Tag (Tattoo# CNA CFR			
Length: 23 (nose to tail) Height: 15 in ch	(top of the head)		
IN-FIELD EXAM: Body Condition Score:	☐ 3 -Thin		
□ 6 - Overweight □ 7 - Heavy	□ 8 - Obese □ 9 - Grossly Obese		
Dental Grade:			
WEDICAET INDITIOS:			
Recommended Treatment (that should be provided by Owner/Operato	or):		
☐ Dog must be housed seperatly due to			
☐ By signing below, I find that this animal is in acute distress, that is, he			
or other care to promptly alleviate a life threatening illness/injury or any			
removed promptly from the facility and placed in the designated third-pa	arty to receive humane care.		
Examining Veterinarian:	(Signature)		
Concurrence (for removal Only) :	(Signature)		
Dr. Samantha Moffitt I and Vate			

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Animal ID #: 10 4 36 - 69

Case #: HY-3301-0150

Location: Cumberland, VA

	ANIMAL PATIENT MEDICAL RECORD - DOG
	In-Field Exam Date: 5/18/32 Clinician(s): Kuzda Initials: KK MI
	Breed: Descrit Color: 1700 407 407 407 Neuter: 17 Nytcircle) Gender: (M) 17 (circle)
	ABB / Birth: 14 weeks est)/Act. (circle) Ear Tag/ Tattoo#) CNR CFP
	Length: 26 inches (nose to tail) Height: 14 inches (top of the head)
ال	IN-FIELD EXAM: Body Condition Score:
	☐ 6 - Overweight ☐ 7 - Heavy ☐ 8 - Obese ☐ 9 - Grossly Obese Dental Grade: ☐ NSF ☐ 1 ☐ 2 ☐ 3 ☐ 4
	MEDICAL FINDINGS:
	WN L
	00.100
	Recommended Treatment (that should be provided by Owner/Operator) :
	□ Dog must be housed seperatly due to
	☐ By signing below, I find that this animal is in acute distress, that is, he/she requires immediate veterinary treatment
	or other care to promptly alleviate a life threatening illness/injury or any suffering, and as such, this animal needs to be
	removed promptly from the facility and placed in the designated third-party to receive humane care.
	Examining Veterinarian: (Signature)
	Concurrence (for removal Only) :(Signature)
	Dr. Samantha Moffitt Lead Vaterinarian